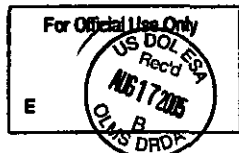


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>7029</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Joseph</u> <u>McGloin</u> P O. Box, Bldg., Room No., if any _____ Street <u>237 Orcuttville Road</u> City <u>Stafford Springs</u> State <u>Connecticut</u> ZIP Code + 4 <u>06076</u>	4. Name, file number, and address of labor organization. Name <u>Iron Workers Local No. 15</u> Labor Organization File Number <u>033-302</u> P O. Box, Building and Room Number, if any _____ Street <u>20-28 Sargeant Street</u> City <u>Hartford</u> State <u>Connecticut</u> ZIP Code + 4 <u>06150</u>
5. Position in labor organization <u>President</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any) Name _____ Trade Name, if any: _____ P O. Box, Bldg., Room No., if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	7. a. Nature of Interest, Transaction, or Income _____ _____ _____ 7.b. Amount _____

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>Joseph McGloin</u>	On <u>08/11/05</u> Date	<u>860-684-2199</u> Telephone Number

Name of Person Filing Joseph McGloin	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <u>Iron workers' Locals 15 & 424 Appr. Fund</u></p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any _____</p> <p>Street <u>300 Research Parkway</u></p> <p>City <u>Meriden</u></p> <p>State <u>Connecticut</u> ZIP Code + 4 <u>06450</u></p>	<p>9 Business deals with</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name</p> <p>Name <u>Iron workers' Locals 15 & 424 Appr. Fund</u></p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any _____</p> <p>Street <u>300 Research Parkway</u></p> <p>City <u>Meriden</u></p> <p>State <u>Connecticut</u> ZIP Code + 4 <u>06450</u></p>	<p>11 a Nature of such dealing.</p> <p><u>Instructor- Iron workers' Locals 15 & 424 Apprentice Training fund</u></p> <p>11.b Approximate dollar value of such dealing <u>N/A</u></p> <p>12 a. Nature of interest held or income received.</p> <p><u>Apprentice Graduation Dinner June 2004</u></p> <p>12 b. Amount <u>\$56</u></p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

<p>13 a. Name and address of Employer or Labor Relations Consultant (including trade name, if any)</p> <p>Name _____</p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ ZIP Code + 4 _____</p>	<p>14 a. Nature of payment.</p>
<p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment.</p> <p>_____</p>

Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name, if any)

Name Iron workers' Locals 15 & 424 Appr. Fund

Trade Name, if any:

P O Box, Bldg., Room No., if any:

Street 300 Research Parkway

City Meriden

State Connecticut

ZIP Code + 4 06450

9 Business deals with

☐ a Labor Organization☒ b Trust☐ c Employer

10. If 9.b or 9.c. is checked give trust or employer's name

Name Iron workers' Locals 15 & 424 Appr. Fund

Trade Name, if any:

P O Box, Bldg., Room No., if any:

Street 300 Research Parkway

City Meriden

State Connecticut

ZIP Code + 4 06450

11 a Nature of such dealing

Instructor- Iron workers' Locals 15 & 424
Apprentice Training fund

11 b Approximate dollar value of such dealing

N/A

12.a Nature of interest held or income received

wages for instructing apprentice training classes

12 b Amount

\$7,866

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name, if any).

Name **Iron workers' Locals 15 & 424 Appr. Fund**

Trade Name, if any

P O Box, Bldg, Room No., if any

Street **300 Research Parkway**City **Meriden**State **Connecticut**ZIP Code + 4 **06450**

9 Business deals with

☐ a Labor Organization☒ b Trust☐ c Employer

10 If 9.b. or 9.c. is checked give trust or employer's name.

Name **Iron workers' Locals 15 & 424 Appr. Fund**

Trade Name, if any

P O Box, Bldg, Room No., if any

Street **300 Research Parkway**City **Meriden**State **Connecticut**ZIP Code + 4 **06450**

11.a. Nature of such dealing.

**Instructor- Iron workers' Locals 15 & 424
Apprentice Training**

11 b. Approximate dollar value of such dealing.

N/A

12.a. Nature of interest held or income received

OSHA Conference - October 2004

12.b. Amount

\$600

Name of Person Filing **Joseph McGloin**

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8. Name and address of Business (including trade name, if any)

Name **Iron Workers District Council of NE - LMCT**

Trade Name, if any

P O Box, Bldg., Room No., if any **P.O. Box 96**Street **191 Old Colony Avenue**City **South Boston**State **Massachusetts**ZIP Code + 4 **02127**

9 Business deals with

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any

P O Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

Member of the district council

11 b. Approximate dollar value of such dealing

N/A

12 a. Nature of interest held or income received.

IMPACT Conference event costs - June 2004

12 b. Amount

\$194